

## DHHS WAIVER ADVISORY COMMITTEE MEETING MINUTES

**Date**: April 18, 2012 **Time**: 1:00 pm – 3:00 pm **Location**: McKimmon Center, Raleigh, NC

<b>MEETING CALLED BY</b>		William "Lee" Smit	h, Chairman				
TYPE OF MEETING DHHS Waiver Ad			visory Committee (DWAC)				
ATTENDEES							
C	EMBERS		STATE STAFF ATTENDEES				
NAME	AFF	ILIATION	PRESENT	NAME	AFFILIATION	PRESENT	
Peggy Terhune	Monarch		$\boxtimes$	Ken Marsh	Lme Support Services	$\boxtimes$	
Margaret Stargell	Coastal Horizons Center, Inc.		$\square$	Jim Jarrard	DMH/DD/SAS Asst. Dir.	$\boxtimes$	
Jack Naftel, MD	NC Physicians Association			Kathy Nichols	DMA Waiver Pgms Mgr		
Rosemary Weaver	State		$\square$	Kelly Crosbie	DMA	$\boxtimes$	
Carol Messina	State		$\square$				
Susan Monroe	Local						
Marc Jacques	Local						
Deby Dihoff	NAMI						
Ellen Perry	DD						
Cherene Allen-Caraco	Mecklenburg	s Promise					
Lois Cavanagh-Daley	NC CANSO				GUEST		
Arthur C. Wilson	Transylvania Co.		Call In	NAME	AFFILIATION	PRESENT	
William Smith III	Wayne Co.			Leza Wainwright	ECBH		
Brian Ingraham	Smoky Mtn.			_			
Ken Jones	Eastpointe						
Mike Watson	Deputy Sec.	for Health Srvcs					
Craigan Gray	Director						
Tara Larson	DMA, Chief COO						
Steve Jordan	Director						
U. Nenna Lekwauwa	Medical Direc	ctor					
1. Agenda topic: V	Velcome and	Approval of Mi	nutes		Presenter(s): Lee S	Smith	
Discussion	Minute	Minutes approved					
Conclusions			.g., ep .e op	<del></del>			

Invitation for Public to sign up to speak.

Conclusions

Action Items

 N/A

Person(s)
Responsible

N/A

2. Agenda topic: Cha	ir Update/Housekeeping Items	Presenter(s): Lee	Smith
Discussion	Change to Agenda – Public Comments Period to be addressed before next Month's Planned Updates.		
	<ul> <li>Role and Responsibility of DWAC – Charter reviewed and clarified. Committee reminded to stay within confines of original charge. Discussed term of DWAC membership. Determined that after first year, terms will split and length will be determined at that time.</li> <li>SA Representative discussed. Invitation put out for additional nominees for this vacancy, none were received. Tony Soward presented as a candidate for the opening. Tony's nomination approved.</li> </ul>		
Conclusions			
<b>Action Items</b>		Person(s) Responsible	Deadline
□ Assigned State Staff to DWAC to contact Mr. Soward for next meeting.		Ken Marsh/Kathy Nichols	4/20/2012

## 3. Agenda topic: ECBH Implementation Process & Updae

## **Presenter(s):** Leza Wainwright **Discussion** Power Point Presentation Outline of efforts made prior to start up - hiring, training, enrollment, communication with Stakeholders, IT systems efforts. Extensive effort put into introducing waiver to community, providers, consumers/families, etc. Data provided on Implementation Budget, Provider Contracting, RFPs. Questions raised on why some providers didn't enroll with network. Answers varied – Some resisted and later enrolled, some not interested due to low number of medicaid recipients, some providers had shut down. Forty-eights providers didn't enroll – 25 consumers transitioned as a result. DMA shuts down the provider number if not enrolled. Shared status after first two weeks as MCO – As of last week up to date on all claims, chose a "soft start" approach (approved through department and DMA) to pay claims and review/correct at later date. Lessons Learned - Recommendations for others in process Questions Is there a counter on the ECBH website? No. but noted that updating the webstie is in the works. Based on the number of clinicians hired, is this taking away from the provider pool and creating problems? Ans: For ECBH no more than two were hired from providers, and some were hired from out-of-state. Will this be a problem state-wide? To be determined as more MCO's start up. EAT has set up a committee to address this issue Care Coordination – ECBH had intended to do majority of care coordination telephonically. Conducted surveys with families and results were positive. Since that time Innovations determined that ISP needed to be face-to-face. They are regrouping to address the issues and working with the deprtment to determine how to handle. Comment made that ECBH has done a good job but it was felt that they were going too fast. DMA Response: Readiness Reviews were conducted, if it is determined that an LME is not ready to move forward, they would not. DHHS response: decision to proceed with "soft start" not preferred method for LME/MCO, and would be an individual conversation with each LME on a case by case if necessary. Questions on relationship with Recovery Innovations - \$1.5 million or 100% of County dollars go to their Recovery efforts. If 100% of county dollars go to recovery, how much for IDD - Response: Plenty of State dollars available out of a \$200 million dollar LME-MCO budget. Their counties have made a priority to this area. Credentialing – If employed by a hospital they do not require credentialing. If contracted with a hospital – they need to be credentialed. Question on hiring – How many had managed care experience or is ECBH acquiring new talent. Response: ECBH was fortunate in acquiring some individuals with experience; they also put in place 8 day orientation for managed care knowledge development. Does the CFAC have input into RFA's related to new services – yes **Conclusions** Power Point Presentation to be available on DMA website.

## Agenda tonic: Presentation/Undates - PRH/WHN

**Action Items** 

None

4. Agenda topic: Pres	sentation/Updates - PBH/WHN	Presenter: Kelly Crosbie
Discussion	<ul> <li>By end of week there will be a Special Medicaid are three standard applications: Agency, Licens will be included in the Bulletin. Some LMEs still</li> <li>MCO Due Process</li> </ul>	ed Professionals, and Hospitals. Websites
	<ul> <li>Grievances – formal complaint about any subjauthorizations).</li> <li>Reconsideration – made to MCO</li> </ul>	ect – made to MCO (generally about

Person(s) Responsible

Deadline

Conclusions	<ul> <li>State Fair Hearing – made to OAH</li> <li>Western Highlands</li> <li>ICF-MR – 16 enrolled – request information on how many individuals – Kelly to get info.</li> <li>Majority of paper claims being submitted by hospitals, not all are contracting with Western Highlands.</li> <li>Request for Blank Contract – available on website.</li> <li>Information requested on penetration rates – Steve Jordan to respond.</li> <li>Power Point Presentation available on website.</li> </ul>		
Action Items	Person(s) Respons	ible Deadline	
ICF-MR	Kelly Crosbie	Next	
Penetration Rates	Steve Jordan / Shealy Thompson	meeting	

5. Agenda topic: Public Comments Period Presenter(s):

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Discussion	•	Gerri Smith		
		The Arc of North Carolina		
		343 East Six Forks Road		
		Raleigh, NC		
		919-782-4632 Ext. 102		
	•	Commended Peggy for bringing questions to committee that providers are interested in.		
	•	Brought Family/Consumer concerns to Committee:		
		1. More information needed – clarification of definition of personal care – part of I Waiver or not		
		2. More information on Innovations waiver options currently in effect, Personal Care, Adult Care Homes		
		3. Need for competent services relative to IDD/MH		
		4. Families/Consumers in IDD community losing their "guiding star" – case manager		
		contact person who helps then.		
		5. Are Waiting Lists being collected for LME-MCO	? How do we know if outcom	e measures
		are accurate if we are not keeping lists? Can w	e trust penetration rates?	
Conclusions	•	Thanked Ms. Smith for comments. Public Session	Closed.	
Action Items				
Assigned State State	aff t	o DWAC to put question on Public Comment	Ken Marsh/Kathy Nichols	5/9/2012
Tracking Log for next sub-committee meeting.				

6. Agenda topic: Updates planned for next month Presenter(s): Ken Marsh

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Discussion	<ul> <li>DWAC page</li> <li>Waiver Issues log hasn't been updated yet.</li> <li>Document on public comments/questions has been developed, subcommittee to be assembled and tracking log to be updated, reviewed and posted.</li> <li>Documents will only be posted after committee/subcommittee have reviewed.</li> <li>Public Comments/Questions Subcommittee meetings to be held twice monthly to process Questions &amp; Answers. Schedule to be determined by subcommittee.</li> <li>Performance Outcomes:</li> <li>Starting Point – two specific outcomes MH/DD/SAS. Possibly survey consumers/families. Recommendation from Committee Member that IDD community is surveyed in different way than other consumers since they learn in different ways.</li> <li>Would like to invite Mercer to future DWAC Meeting</li> <li>Request for baseline standards on issues we wish to monitor</li> <li>Fact Sheets for MH, IDD and SA</li> </ul>
	<ul> <li>Fact Sheets for MH, IDD and SA</li> <li>Staff identified to work on fact sheets: Marc Jacques, Committee Member/Emery Cowan, DMHDDSAS staff for mental health; Ellen Perry, Committee Member/Sandra</li> </ul>
	Ellswowrth, DMHDDSAS for IDD; Margaret Stargell, Committee Member/Tony

	Sowards, Committee Member/Lee Lewis, DMHDDSAS for SA.  • Ellen Perry stated based upon lessons learned from PBH and OPC LME/MCOs going live we should think about these things:			
	Provider network list for IDD population needs to be on line before MCO goes live			
	before MCO goes live – available on line			
	Requested MCO have earlier hiring and training for care coordinators			
	Definition of community guides in place/hired before start up.			
	IT system needs to be in place before MCO's go live date.			
	<ul> <li>Cherene Allen-Caraco: Request for formal way to capture concerns of consumers/families         <ul> <li>not just at DWAC. Committee reminded that CFAC and existing processes are in place</li></ul></li></ul>			
Conclusions	Kathy and Shealy being asked to assist/join subcommittees.			
<b>Action Items</b>		Person(s) Responsible	Deadline	
<ul> <li>Post Meeting – Sub-committee to decide on next meeting times for phone and maybe face to face meeting. (Post meeting decision made to meet the 2<sup>nd</sup> Wednesday of each month by phone from 4pm to 5pm. Face to Face meeting would be monthly prior to each DWAC meeting from 11am to Noon in the same meeting room.</li> </ul>		State Assigned Staff to work with Peggy Terhune – Subcommittee chair.	5/8/2012	

Next Meeting: Tuesday, May 22, 2012, 1:00 p.m. – 3:00 p.m.